U. S. Army Garrison Fort Monmouth Restoration Advisory Board

Application and Community Interest Form

Conditions for Membership:

Restoration Advisory Board (RAB) members are volunteering to serve a term and attend all RAB meetings. Duties and responsibilities will include reviewing and commenting on plans and activities associated with the Installation Restoration Program at Fort Monmouth. Technical experts will be made available to the RAB. Members will be expected to be available to community members and groups to facilitate the exchange of information and/or concerns between the communities and the RAB. RAB community members can expect to devote approximately 2-4 hours-per-month to support the RAB. Priority for RAB membership will be given to local residents that are impacted/affected by Fort Monmouth.

Name:							
Address:							
Street		Apt.		Cit	У	State	Zip
Phone: ()						_()	
Home		W	ork			Fax	
E-mail:							
Local Business N	ame.						
(If Applicable)	ume						
Local Business A	ddress: _						
(If Applicable)					ty	State	Zip
Age (circle one):	18-25	26-35	36-45	46-55	56-65	66 or older	
Number of years l	iving/wo	orking in	local area	l	·		

- 1. Please indicate why you would like to participate on the RAB?
- 2. Working as part of a diverse group on complicated issues can be challenging. What experience do you have that might be useful to the RAB as its members work toward developing and achieving common goals?

	e you affiliated with any group related to or interested in environmental restoration ties? If yes, list the name of the group, size of membership and your position.
Comi	e community members of the RAB select the Community Co-Chairperson. The munity Co-Chair works with the Fort Monmouth Co-Chair to develop the monthly da and help ensure that RAB members participate in an open and constructive er. Please indicate your interest in this position?
	Yes, I would like to be considered. No, I would not be interested.
	defly describe your educational background that might be useful in the RAB or commental cleanup process.
	nat is your current occupation and do you have any previous professional riences that might be relevant or helpful?
7. Ho	w long have you followed the Fort Monmouth cleanup efforts?
	otecting the health of children is a high priority for all involved. In turn, do you any children living at home? If so, what are their ages?
9. Do RAB	you have any hobbies (i.e. gardening) that might provide a useful perspective to the?
you v	re there any other comments or considerations, such as specific health concerns the would like to add that might assist the Selection Committee in the application reviewss?

- 11. Please identify whether you or any member of your immediate family (spouse, children, and siblings) is employed by the U.S. Environmental Protection Agency (USEPA), NJ Department of Environmental Protection (NJDEP), U.S. Army Fort Monmouth Environmental office, or an entity performing work involving the investigation, health assessment, or cleanup of Fort Monmouth or related activities. Also please identify their employer and job title and describe in detail their work duties.
- 12. Please state whether you are employed by an entity which contracts with the USEPA, NJDEP, or an entity performing work involving the investigation, health assessment, or cleanup of Fort Monmouth or related activities. If so employed, please identify your employer and job title and describe in detail the scope of such contracts and your personal involvement in such contracting work.

Privacy Act Notice

Authority: 10 U.S. Code (USC) 2705.

<u>Principal Purpose</u>: To identify and select members of the local community who are interested in serving on the RAB.

<u>Routine Uses</u>: The requested information will be used to develop a list of interested persons from which the community members of the RAB will be selected. The information also will be used by the U.S. Army to contact the individuals who are selected. The information will not be used for purposes unrelated to the Principal Purpose without prior written permission from the Applicant.

Disclosure of the requested information is voluntary. Failure to provide all the requested information may prevent selection to serve on the RAB.

Applicant's Signature	Date	

Please mail this form to the following mailing address:

U.S. Army Garrison Fort Monmouth ATTN: Public Affairs Office Building 1207, Room G07 Fort Monmouth, NJ 07703 Com. (732)532-1258; Fax (732)532-6262